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RULE				

APPLICANTS

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** CONTINUING DATA ***** None *18*** FOREIGN APPLICATIONS ***** None *18*

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** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 1	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>JOE NIEH</i> Examiner's Signature _____ Initials _____				

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TITLE

Flow control/shock absorbing seal

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT RECEIVED 463	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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